

MSR10 8053

(NUMBER TO BE ASSIGNED BY STATE)

APPLICANT IS THE:  OWNER  PRIME CONTRACTOR

OWNER CONTACT INFORMATION

OWNER CONTACT PERSON: Lezlye Donahue
OWNER COMPANY LEGAL NAME: Relativity Space, Inc.
OWNER STREET OR P.O. BOX: Building 4080
OWNER CITY: Stennis Space Center STATE: MS ZIP: 39529
OWNER PHONE #: (985) 9606447 OWNER EMAIL: ldonahue@relativityspace.com

PRIME CONTRACTOR CONTACT INFORMATION

PRIME CONTRACTOR CONTACT PERSON: Jace Owens
PRIME CONTRACTOR COMPANY LEGAL NAME: Relativity Space, Inc.
PRIME CONTRACTOR STREET OR P.O. BOX: Building 4080
PRIME CONTRACTOR CITY: Stennis Space Center STATE: MS ZIP: 39529
PRIME CONTRACTOR PHONE #: (504) 2581176 PRIME CONTRACTOR EMAIL: jowens@relativityspace.com

FACILITY SITE INFORMATION

FACILITY SITE NAME: Terran R Test Facility
FACILITY SITE ADDRESS (If the physical address is not available, please indicate the nearest named road. For linear projects indicate the beginning of the project and identify all counties the project traverses.)
STREET: Propellant Road & Saturn Drive
CITY: Stennis Space Center STATE: MS COUNTY: Hancock ZIP: 39529
FACILITY SITE TRIBAL LAND ID (N/A If not applicable): NA
LATITUDE: 30 degrees 22 minutes 18.6 seconds LONGITUDE: -89 degrees 35 minutes 37.1 seconds
LAT & LONG DATA SOURCE (GPS (Please GPS Project Entrance/Start Point) or Map Interpolation): Map Interpolation
TOTAL ACREAGE THAT WILL BE DISTURBED: 22.88
IS THIS PART OF A LARGER COMMON PLAN OF DEVELOPMENT? YES [ ] NO [x]
IF YES, NAME OF LARGER COMMON PLAN OF DEVELOPMENT: NA AND PERMIT COVERAGE NUMBER: MSR10
ESTIMATED CONSTRUCTION PROJECT START DATE: 2022-03-18
ESTIMATED CONSTRUCTION PROJECT END DATE: 2022-12-31
DESCRIPTION OF CONSTRUCTION ACTIVITY: Construction of two engine test stands, deluge tank, bulk gas storage, and ancillary buildings
PROPOSED DESCRIPTION OF PROPERTY USE AFTER CONSTRUCTION HAS BEEN COMPLETED: Space flight hardware and launch vehicle design, assembly, processing, and testing necessary or desirable to develop and operate a commercial service for delivery of cargo and payloads to space
SIC Code 3 7 6 1 NAICS Code 3 3 6 4 1 4

m-received via email 2.18.22

DECLARATION OF THE CONTRACTOR

I, the undersigned, being duly qualified and licensed to practice as a contractor in the State of New York, do hereby certify that the following is a true and correct copy of the contract as shown to me by the architect or engineer in charge of the project.

THE CONTRACTOR'S NAME AND ADDRESS: [Name] [Address]

THE CONTRACTOR'S PHONE NUMBER: [Number]

THE CONTRACTOR'S SIGNATURE: [Signature]

DATE: [Date]

PROJECT NAME AND ADDRESS: [Name] [Address]

PROJECT NUMBER: [Number]

PROJECT LOCATION: [Location]

PROJECT VALUE: [Value]

PROJECT TYPE: [Type]

PROJECT DESCRIPTION: [Description]

PROJECT STATUS: [Status]

PROJECT CONTACT: [Contact]

DECLARATION OF THE ARCHITECT

I, the undersigned, being duly qualified and licensed to practice as an architect in the State of New York, do hereby certify that the following is a true and correct copy of the contract as shown to me by the contractor.

THE ARCHITECT'S NAME AND ADDRESS: [Name] [Address]

THE ARCHITECT'S PHONE NUMBER: [Number]

THE ARCHITECT'S SIGNATURE: [Signature]

DATE: [Date]

PROJECT NAME AND ADDRESS: [Name] [Address]

PROJECT NUMBER: [Number]

PROJECT LOCATION: [Location]

PROJECT VALUE: [Value]

PROJECT TYPE: [Type]

PROJECT DESCRIPTION: [Description]

PROJECT STATUS: [Status]

PROJECT CONTACT: [Contact]

NOT TO BE RECORDED BY THE STATE

STATE OF NEW YORK

**NEAREST NAMED RECEIVING STREAM:** East Pearl River

**IS RECEIVING STREAM ON MISSISSIPPI'S 303(d) LIST OF IMPAIRED WATER BODIES? (The 303(d) list of impaired waters and TMDL stream segments may be found on MDEQ's web site: [http://www.deq.state.ms.us/MDEQ.nsf/page/TWB\\_Total\\_Maximum\\_Daily\\_Load\\_Section](http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section))** YES  NO

**HAS A TMDL BEEN ESTABLISHED FOR THE RECEIVING STREAM SEGMENT?** YES  NO

**ARE THERE RECREATIONAL STREAMS, PRIVATE/PUBLIC PONDS OR LAKES WITHIN 1/2 MILE DOWNSTREAM OF PROJECT BOUNDRY THAT MAY BE IMPACTED BY THE CONSTRUCTION ACTIVITY?** YES  NO

**EXISTING DATA DESCRIBING THE SOIL (for linear projects please describe in SWPPP):**

located within the coastal deposits of the MS Gulf coast. Characterized by a cross-bedded mixture of silt, sand, gravel, and clay. Deposits may also contain limestone at depth. Sediments of the coastal deposits lack regional lithologic layering and tend to be discontinuous with variable thickness.

**WILL FLOCCULANTS BE USED TO TREAT TURBIDITY IN STORM WATER?** YES  NO

**IF YES, INDICATE THE TYPE OF FLOCCULANT.**  ANIONIC POLYACRYLAMIDE (PAM)  OTHER \_\_\_\_\_

**IF YES, DOES THE SWPPP DESCRIBE THE METHOD OF INTRODUCTION, THE LOCATION OF INTRODUCTION AND THE LOCATION OF WHERE FLOCCULATED MATERIAL WILL SETTLE?** YES  NO

<sup>1</sup>Acreage for subdivision development includes areas disturbed by construction of roads, utilities and drainage. Additionally, a housesite of at least 10,000 ft<sup>2</sup> per lot (entire lot, if smaller) shall be included in calculating acreage disturbed.

**DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS**  
 COVERAGE UNDER THIS PERMIT WILL NOT BE GRANTED UNTIL ALL OTHER REQUIRED  
 MDEQ PERMITS AND APPROVALS ARE SATISFACTORILY ADDRESSED

IS LCNOI FOR A FACILITY THAT WILL REQUIRE OTHER PERMITS? YES  NO

IF YES, CHECK ALL THAT APPLY:  AIR  HAZARDOUS WASTE  PRETREATMENT  
 WATER STATE OPERATING  INDIVIDUAL NPDES  OTHER: Industrial Wastewater

IS THE PROJECT REROUTING, FILLING OR CROSSING A WATER CONVEYANCE OF ANY KIND? (If yes, contact the U.S. Army Corps of Engineers' Regulatory Branch for permitting requirements.) YES  NO

IF THE PROJECT REQUIRES A CORPS OF ENGINEER SECTION 404 PERMIT, PROVIDE APPROPRIATE DOCUMENTATION THAT:

- The project has been approved by individual permit, or
- The work will be covered by a nationwide permit and NO NOTIFICATION to the Corps is required, or
- The work will be covered by a nationwide or general permit and NOTIFICATION to the Corps is required

IS A LAKE REQUIRING THE CONSTRUCTION OF A DAM BEING PROPOSED? (If yes, provide appropriate approval documentation from MDEQ Office of Land and Water, Dam Safety.) YES  NO

IF THE PROJECT IS A SUBDIVISION OR A COMMERCIAL DEVELOPMENT, HOW WILL SANITARY SEWAGE BE DISPOSED? Check one of the following and attach the pertinent documents.

- Existing Municipal or Commercial System. Please attach plans and specifications for the collection system and the associated "Information Regarding Proposed Wastewater Projects" form or approval from County Utility Authority in Hancock, Harrison, Jackson, Pearl River and Stone Counties. If the plans and specifications can not be provided at the time of LCNOI submittal, MDEQ will accept written acknowledgement from official(s) responsible for wastewater collection and treatment that the flows generated from the proposed project can and will be transported and treated properly. The letter must include the estimated flow.
- Collection and Treatment System will be Constructed. Please attach a copy of the cover of the NPDES discharge permit from MDEQ or indicate the date the application was submitted to MDEQ (Date: \_\_\_\_\_.)
- Individual Onsite Wastewater Disposal Systems for Subdivisions Less than 35 Lots. Please attach a copy of the Letter of General Acceptance from the Mississippi State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.
- Individual Onsite Wastewater Disposal Systems for Subdivisions Greater than 35 Lots. A determination of the feasibility of installing a central sewage collection and treatment system must be made by MDEQ. A copy of the response from MDEQ concerning the feasibility study must be attached. If a central collection and wastewater system is not feasible, then please attach a copy of the Letter of General Acceptance from the State Department of Health or certification from a registered professional engineer that the platted lots should support individual onsite wastewater disposal systems.

INDICATE ANY LOCAL STORM WATER ORDINANCE WITH WHICH THE PROJECT MUST COMPLY:

NA  
 \_\_\_\_\_  
 \_\_\_\_\_

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.



Signature of Applicant<sup>1</sup> (owner or prime contractor)

02/14/2022

Date Signed

Clay Walker

Printed Name<sup>1</sup>

Director, Test Operations

Title

<sup>1</sup>This application shall be signed as follows:

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.

For a municipal, state or other public facility, by principal executive officer, mayor, or ranking elected official

Please submit the LCNOI form to:

Chief, Environmental Permits Division  
MS Department of Environmental Quality, Office of Pollution Control  
P.O. Box 2261  
Jackson, Mississippi 39225